Oral Health During Pregnancy

Hormonal changes during pregnancy can negatively impact a woman's oral health, potentially initiating pregnancy gingivitis, benign oral gingival lesions, tooth mobility, tooth erosion, dental caries and periodontitis^{1,2}. Pregnancy and early childhood are particularly important times to access oral health care since the consequences of poor oral health can have a lifelong effect³—and because pregnancy is a "teachable moment" when women are receptive to changing behaviors that can benefit themselves and

their children. Oral health care in pregnancy is often avoided and misunderstood by dentists, physicians and pregnant women because of the lack of information or perceptions about the safety and importance of dental treatment during pregnancy³.

Who Is At Risk Of Not Getting Teeth Cleaned During Pregnancy?

- Non-Hispanic, Black women
- Women less than 24 years old
- Women with a high school education or less
- · Women who are not married
- Women with no health insurance one month before pregnancy
- WIC participants during pregnancy

65.0%

of moms reported NOT having their teeth cleaned during pregnancy.

Source: GA PRAMS 2012 - 2013

Table 1. Maternal Characteristics of Georgia PRAMS Respondents	;
by Teeth Cleaning Status During Pregnancy, 2012-2013	

		Teeth Cleaned During Pregnancy		
		<u>No</u>	<u>Yes</u>	
	Weighted	Weighted %	Weighted %	
Characteristic	N	(95% CI)	(95% CI)	
Total	187,285	65.0%	35.0%	
Race/Ethnicity				
White, Non-Hispanic	86,594	58.0 (53.1, 62.8)	42.0 (37.2, 46.9)	
Black, Non-Hispanic	58,014	69.1 (63.6, 74.1)	30.9 (25.9, 36.5)	
Hispanic	27,385	81.8 (73.9, 87.8)	18.2 (12.3, 26.1)	
Other, Non-Hispanic	11,162	62.5 (48.6, 74.7)	37.5 (25.4, 51.4)	
Maternal Age				
< 20 years	15,522	71.3 (63.9, 77.7)	28.7 (22.3, 36.1)	
20-24 years	44,919	75.3 (68.8, 80.8)	24.8 (19.3, 31.3)	
25-29 years	57,176	62.3 (56.1, 68.2)	37.7 (31.8, 43.9)	
30-34 years	43,271	61.6 (54.7, 68.1)	38.4 (31.9, 45.3)	
≥ 35 years	26,394	54.9 (46.1, 63.4)	45.1 (36.6, 54.0)	
Maternal Education			(
< High School	28,801	78.2 (71.0, 84.0)	21.8 (16.0, 29.0)	
High School Graduate	54,908	71.4 (65.6, 76.5)	28.7 (23.5, 34.4)	
Some College	42,981 54,301	62.1 (55.1, 68.6)	37.9 (31.4, 44.9)	
College Graduate	54,501	54.7 (48.4, 60.8)	45.4 (39.2, 51.6)	
Marital Status				
Married	106,045	59.8 (55.4, 64.2)	40.2 (35.9, 44.7)	
Other	81,041	71.7 (67.1, 75.9)	28.3 (24.2, 32.9)	
County of Residence				
Urban	136,943	64.3 (60.5, 67.9)	35.7 (32.1, 39.5)	
Rural	50,341	66.7 (60.3, 72.5)	33.3 (27.5, 39.7)	
Health Insurance 1				
month Before Pregnancy				
Yes	115,542	56.6 (52.4, 60.7)	43.4 (39.3, 47.6)	
No	70,396	78.8 (74.1, 82.9)	21.2 (17.1, 26.0)	
First Time Mom	70,000	70.0 (71.1, 02.0)	21.2 (17.11, 20.0)	
Yes	75,090	68.0 (63.8, 71.9)	32.0 (28.1, 36.2)	
No	110,040	60.2 (55.1, 65.2)	39.8 (34.9, 44.9)	
WIC During Pregnancy		(33.1, 33.2)	1110 (0,)	
Yes	106,545	74.8 (70.9, 78.3)	25.2 (21.7, 29.1)	
No	79,937	51.5 (46.3, 56.7)	48.5 (43.3, 53.7)	
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PRAMS: Pregnancy Risk Assessment Monitoring System; CI: Confidence Interval Note: PRAMS data were weighted to account sampling probabilities, non-response, and non-coverage.





Georgia PRAMS Oral Health Fact Sheet

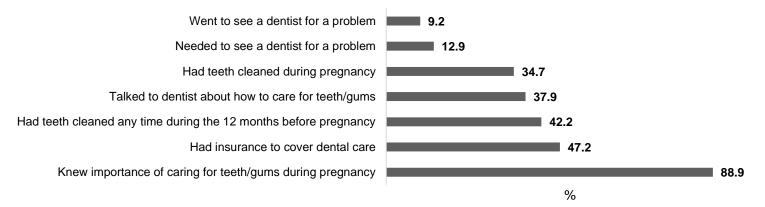
Oral Health Behaviors among Georgia Pregnant Women, 2012-2013

• Commonly reported oral health problems during most recent pregnancy included having cavities (50.4%), a toothache (49.6%), needing to have a tooth pulled (36.2%), having painful, red, or swollen gums (33.8%), and

other problems (20.4%).

- Commonly reported barriers to going to the dentist about a problem included not being able to afford to go (27%), dentist did not take Medicaid (17.7%), mom didn't think it was safe to go to the dentist (17.5%).
- Although the majority of women (88.9%) were aware of the importance of oral health during pregnancy, less than half had their teeth cleaned during pregnancy (34.7%) or at any time during the 12 months before pregnancy (42.2%) (Figure 1).

Figure 1: Oral Health Behaviors Among Georgia PRAMS Respondents (n = 190,672) During Most Recent Pregnancy, 2012-2013



References:

- 1. American College of Obstetricians and Gynecologists. (2013). Committee Opinion No. 569: oral health care during pregnancy and through the lifespan. Obstet Gynecol, 122(2 Pt 1), 417-22.
- 2. American Dental Association. (2011). Oral health during pregnancy: What to expect when expecting. *The Journal of the American Dental Association*, 142(5), 574.
- 3. Oral health: During pregnancy & early childhood: Evidence-based guidelines for health professionals. California Dental Association Foundation [Internet]. 2010. Available from: www.cdafoundation.org/portals/0/pdfs/poh_quidelines.pdf

The Georgia PRAMS *Oral Health Fact Sheet* is published as new data become available by the MCH Epidemiology Section, Epidemiology Program, Division of Health Protection, Georgia Department of Public Health. For data requests, please apply through the Public Health Information Portal in Georgia DPH at dph.ga.gov/phip-data-request.

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FOR MORE INFORMATION

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